

# CONTRACT ROUTING SHEET

Date Prepared: 01-14-2015  
01-06-2015

Need Date: Please Rush

### PROCESSING DEPARTMENT:

Department: HHSA  
Dept. Contact: Zhana Mc Cullough  
Phone #: 7154  
Department  
Head Signature: [Signature]  
Don Ashton, M.P.A., Director

### CONTRACTOR:

Name: CA Dept. of Community Services  
Address: 2389 Gateway Oaks Dr., Suite 100  
Sacramento, CA 95833  
Phone: \_\_\_\_\_

### CONTRACTING DEPARTMENT: HHSA/Community Services

Service Requested: 2015 Community Services Block Grant (revenue)  
Contract Term: 01/01/2015 - 12/31/2015 Contract/Grant Value: \$265,790  
Compliance with Human Resources requirements? N/A X Yes        No:         
Compliance verified by: \_\_\_\_\_

*71,802 gm*  
*71,802 \**  
*?*  
*The amount on the old agreement is \$71,802 for some reason denied*

### COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: X Disapproved: \_\_\_\_\_ Date: 1/21/15 By: [Signature]  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*Need to make the amounts consistent - Resol. IDs that here cd be add'l amts, but the agmt is only for \$71,802*  
*Corrected Contract Routing Sheet*  
01-22-2015  
*gm*

DORADO COUNTY COUNSEL  
JAN 21 4:11:56 PM

### PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

### RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: X Disapproved: \_\_\_\_\_ Date: 1/21/15 By: [Signature]  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*This docs already on file with the CA Dept of Comm Services*

### OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

**NOTE:** Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments: Information Technologies

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

[Signature]  
CFO Review  
1/13/15  
Date

[Signature]  
Program Manager II, Administration and Contracts  
1/13/15  
Date  
1/19/15  
15-0123 A 1 of 3

Contract #: 328-F1511  
Index Code: 531011

# CONTRACT ROUTING SHEET

Date Prepared: 12-01-2014

Need Date: Please Rush

**PROCESSING DEPARTMENT:**

Department: HESA  
Dept. Contact: Zhana Mc Cullough  
Phone #: 7154  
Department  
Head Signature: Don Ashton, M.P.A., Director

**CONTRACTOR:**

Name: CA Dept. of Community Services  
Address: 2389 Gateway Oaks Dr., Suite 100  
Sacramento, CA 95833  
Phone:

**CONTRACTING DEPARTMENT:** HESA/Community Services

Service Requested: 2015 Community Services Block Grant  
Contract Term: 01/01/2015 – 12/31/2015 Contract/Grant Value: \$265,790  
Compliance with Human Resources requirements? N/A Yes No  
Compliance verified by:

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved: Disapproved: Date: By:  
Approved: Disapproved: Date: By:

**PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!**

**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: Date: By:  
Approved: Disapproved: Date: By:

**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

**NOTE:** Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments: Information Technologies  
Approved: ✓ Disapproved: Date: 12/17/2014 By: Jon Henry  
Approved: Disapproved: Date: By:  
See attached comments



# County of El Dorado

## Information Technologies

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**Jon Henry**  
**Program Manager**

Address: 360 Fair Lane  
Placerville, CA 95667  
Voice (530) 621-5452

### MEMORANDUM

**Date:** December 17, 2014

**Subject:** Contract Review, Contract #328-F1511

Information Technologies reviewed the subject contract, and the following items are noted:

***Subpart E—Certifications and Assurances, Paragraph A 9 (page 39)***

This section requires compliance with a number of Federal and State regulations. The listed item, Management Memo 08-11, requires a number of safeguards. The following are notable items from that document that may require HHSA action:

- All users (contractors, employees, managers) must be trained in privacy and security policies prior to being allowed access to the agency's data.
- All authorized users must sign an acknowledgement at least once a year that they have received training and are aware of their responsibilities to protect private information.
- Sensitive or personal data on mobile devices or any other media or device must be encrypted.
- SSNs should not be used as personal identifiers or authentication credentials.

Management Memo 08-11 also mandates responsibilities for the contracted agency (HHSA) regarding notification of persons affected by security breaches and disclosure of personal information.

*"The commitment of the Information Technologies staff is to deliver creative, practical solutions and services in support of the current and future technological needs of El Dorado County."*